

JAN 03 2007

PTO/SB/17 (12-04v2)

Approved for use through 07/31/2006. OMB 0651-0032

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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Effective on 12/08/2004. Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4918). FEE TRANSMITTAL For FY 2005		Complete If Known Application Number 10/671,141 Filing Date 09/25/2003 First Named Inventor Hughes Examiner Name Hewitt Art Unit 3679 Attorney Docket No. AHUG.015	
<input checked="" type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27			
TOTAL AMOUNT OF PAYMENT	(\$)	510.00	

METHOD OF PAYMENT (check all that apply)

☐ Check ☐ Credit Card ☐ Money Order ☐ None ☐ Other (please identify): _____
☒ Deposit Account Deposit Account Number: 50-1990 Deposit Account Name: Gordon & Rees, LLP
 For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)
☒ Charge fee(s) indicated below ☐ Charge fee(s) indicated below, except for the filing fee
☒ Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17 ☒ Credit any overpayments

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FEE CALCULATION

1. BASIC FILING, SEARCH, AND EXAMINATION FEES

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	
Utility	300	150	500	250	200	100	
Design	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	
Reissue	300	150	500	250	600	300	
Provisional	200	100	0	0	0	0	

2. EXCESS CLAIM FEES

Fee Description	Fee (\$)	Small Entity Fee (\$)
Each claim over 20 (including Reissues)	50	25
Each independent claim over 3 (including Reissues)	200	100
Multiple dependent claims	360	180
Total Claims	Extra Claims	Fee (\$)
- 20 or HP = 0	x	= 0
HP = highest number of total claims paid for, if greater than 20.		
Indep. Claims	Extra Claims	Fee (\$)
- 3 or HP = 0	x	= 0
HP = highest number of independent claims paid for, if greater than 3.		
	Multiple Dependent Claims	Fee (\$)
	Fee Paid (\$)	

3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(c)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee (\$)	Fees Paid (\$)
- 100 = 0	/ 50 =	(round up to a whole number) x		

4. OTHER FEE(S)

Non-English Specification, \$130 fee (no small entity discount)	Fees Paid (\$)
Other (e.g., late filing surcharge): Petition for Extension of Time	510.00

SUBMITTED BY

Signature	<i>Rudolf O. Siegesmund</i>	Registration No. (Attorney/Agent) 37,720	Telephone 214-231-4880
Name (Print/Type)	Rudolf O. Siegesmund	Date January 3, 2007	

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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FACSIMILE TRANSMISSION**GORDON & REES LLP****RECEIVED
CENTRAL FAX CENTER****JAN 03 2007**ATTORNEYS AT LAW
2100 ROSS AVENUE, SUITE 2600
DALLAS, TX 75201
PHONE: (214) 461-4050
FAX: (214) 461-4053
WWW.GORDONREES.COM**DATE:** January 3, 2007**To:**

NAME	COMPANY	FAX NO.	PHONE NO.
Commissioner for Patents	USPTO	571-273-8300	

FROM: Rudolf O. Siegesmund**SENDER INFORMATION (NAME / USER ID / EXTENSION):** / /**FILE NO.:** AHUG.015 **NUMBER OF PAGES, INCLUDING COVER:** 18

IF YOU DO NOT RECEIVE ALL OF THE PAGES, PLEASE PHONE (214) 461-4050 AS SOON AS POSSIBLE.

MESSAGE:

Re: Response to Office Action mailed July 17, 2006

Application: 10/671,141
Applicant: Hughes
Filing Date: 09/25/2003
Examiner: Hewitt
Art Unit: 3679

Attached are the following:

- Response to Office Action mailed 7/17/06;
- Petition for Extension of Time;
- Transmittal Form; and
- Fee Transmittal

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JAN 03 2007

PTO/SB/21 (09-04)

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U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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TRANSMITTAL FORM (to be used for all correspondence after initial filing)	Application Number	10/671,141
	Filing Date	09/25/2003
	First Named Inventor	Hughes
	Art Unit	3679
	Examiner Name	Hewitt
Total Number of Pages in This Submission	Attorney Docket Number	AHUG.015

ENCLOSURES (Check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form <input checked="" type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input checked="" type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) (please identify below):
Remarks		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm Name	Gordon & Rees, LLP		
Signature	<i>Rudolf O. Siegesmund</i>		
Printed name	Rudolf O. Siegesmund		
Date	January 3, 2007	Reg. No.	37,720

CERTIFICATE OF TRANSMISSION/MAILING

I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below:			
Signature	<i>Pat Milfeld</i>		
Typed or printed name	Pat Milfeld	Date	January 3, 2007

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